

PRINT in INK

Enter the name of the county in which the original case was filed.	STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY	<i>For Official Use</i>
Mark marriage or paternity. If paternity, enter initials of child.	In RE: The <input type="checkbox"/> marriage <input type="checkbox"/> paternity of _____	
Enter the name, address, and daytime phone number of the petitioner or joint petitioner from the original case file.	Petitioner/Joint Petitioner: _____ First name Middle name Last name _____ Current Mailing Address _____ City State Zip Daytime phone number	
On the far right, mark the box for the change(s) you are requesting and enter the original case number.	vs.	
Enter the name, address, and daytime phone number of the respondent or joint petitioner from the original case file.	Respondent/Joint Petitioner: _____ First name Middle name Last name _____ Current Mailing Address _____ City State Zip Daytime phone number	
Mark if the State of Wisconsin is a party or not. If you are unsure, you may call your local Child Support Agency.	The State of Wisconsin (Child Support Agency) <input type="checkbox"/> is <input type="checkbox"/> is not a party to this action.	Stipulation and Order to Change: <input type="checkbox"/> Legal Custody <input type="checkbox"/> Physical Placement <input type="checkbox"/> Child Support <input type="checkbox"/> Maintenance <input type="checkbox"/> Family Support <input type="checkbox"/> Arrears Balances <input type="checkbox"/> Other: _____ Case No. _____

<p>If you are modifying financial orders, check 1A and complete 1B and 1C.</p> <p>If you are changing child support check A.</p> <p>In 1, indicate the current child support order by checking a or b. If b indicate the amount of support and the name of the parent who currently pays.</p>	<p>The parties agree that the judgment or order in this case should be changed as follows, and that the court may enter this stipulation as an order without a court hearing.</p> <p>1A. <input type="checkbox"/> Modify Current Financial Order(s) as follows:</p> <p>A. <input type="checkbox"/> Child Support</p> <p>1. That is currently:</p> <p>a. <input type="checkbox"/> held open (\$0).</p> <p>b. <input type="checkbox"/> \$ _____ <input type="checkbox"/> % _____ per month and paid by (parent) _____</p> <p>2. To the following as of the first day of the month of _____, 20 _____</p> <p>a. <input type="checkbox"/> held open (\$0) because _____</p> <p>b. <input type="checkbox"/> \$ _____ per month <input type="checkbox"/> % _____ per month and paid by (parent) _____ to (parent) _____</p> <p>3. This new order for child support is based on: (All calculations are based on gross income)</p> <p><input type="checkbox"/> 17% for one child.</p> <p><input type="checkbox"/> 25% for two children.</p> <p><input type="checkbox"/> 29% for three children.</p> <p><input type="checkbox"/> 31% for four children.</p> <p><input type="checkbox"/> 34% for five or more children.</p> <p><input type="checkbox"/> split-placement formula.</p> <p><input type="checkbox"/> shared-placement formula.</p> <p><input type="checkbox"/> serial-family payer formula.</p> <p><input type="checkbox"/> low-income payer formula.</p> <p><input type="checkbox"/> high-income payer formula.</p> <p><input type="checkbox"/> None of the above, explain calculation used: _____</p> <p>Calculate amount support would be using percentage/formula above: _____.</p> <p>Calculate amount support deviates from percentage/formula above: _____.</p>
<p>In 2, indicate the month and year the new payment should begin and what you have agreed to change the child support to by checking a or b. If a, enter the reason you are holding the child support open. If b, enter the amount of the monthly order and indicate which parent will be making the payments and to whom.</p>	
<p>In 3, check which child support calculation you used. If none, explain and complete what support would be and how it deviates from percentage/formula.</p>	

If you are changing any category B-G. Check the type of support you are changing.

In 1, check a or b. If b indicate the amount of support and the name of the party who currently pays.

In 2, indicate the month and year the payment should begin and what you have agreed to change the support amount to by checking a or b. If b, enter the amount of the monthly order and indicate which parent will be making the payments and to whom.

B. ☐ Maintenance

1. That is currently:

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month and paid by (party) _____

2. Shall be changed to the following as of the first day of the month of _____, 20 _____

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month

and paid by (party) _____ to (party) _____

C. ☐ Family Support

1. That is currently:

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month and paid by (party) _____

2. Shall be changed to the following as of the first day of the month of _____, 20 _____

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month as ☐ Family Support ☐ Child Support

and paid by (party) _____ to (party) _____

D. ☐ Arrears

1. Payment that is currently:

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month and paid by (party) _____

2. Shall be changed to the following as of the first day of the month of _____, 20 _____

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month

and paid by (party) _____ to (party) _____

E. ☐ Arrears Interest

1. Payment that is currently:

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month and paid by (party) _____

2. Shall be changed to the following as of the first day of the month of _____, 20 _____

a. ☐ \$ 0.

b. ☐ \$ _____ ☐% _____ per month

and paid by (party) _____ to (party) _____

F. ☐ Child Support Arrears Balance

1. That is currently:

a. ☐ \$ 0.

b. ☐ \$ _____ owed by (party) _____

2. Shall be changed to the following as of the first day of the month of _____, 20 _____

a. ☐ \$ 0.

b. ☐ \$ _____

G. ☐ Other Arrears Balance

1. For (type(s) of arrears) _____ that is currently:

a. ☐ \$ 0.

b. ☐ \$ _____ owed by (party) _____

2. Shall be changed to the following as of the first day of the month of _____, 20 _____

a. ☐ \$ 0.

b. ☐ \$ _____

H. ☐ Other Financial Orders:

If H, describe the other financial agreements in as much detail as possible. Include amounts, dates, names, etc.

In 1B, check A or B.

If B, check 1 or 2.

If 2, complete the payer's employer information.

1B. Payments shall be made:

A. ☐ No payments are ordered to be made.

B. ☐ to the Wisconsin Support Collections Trust Fund (WI SCTF) at Box 74200, Milwaukee, Wisconsin 53274-0200:

1. ☐ directly from the payer to WI SCTF (only allowable if self-employed).

2. ☐ by income assignment from the payer's employer as indicated below:

Employer name _____
 Address of payroll office _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____

In 1C, complete the gross monthly income (before taxes).

If you are requesting any changes to legal custody or physical placement, check 2. Enter the names of the children involved and check all that apply in A-G.

Complete all relevant information and attach a copy of your proposed placement schedule, if applicable.

If you are modifying anything else, check and complete 3.

1C. Income

The financial changes agreed upon above are based on the following current facts:

A. Wife/Mother Gross monthly income: \$ _____
 B. Husband/Father Gross monthly income: \$ _____

2. ☐ Modify Legal Custody and/or Physical Placement Order(s) for the following children:

- A. ☐ to joint legal custody with both parents.
 B. ☐ to sole legal custody with _____
 C. ☐ from primary physical placement with (name of parent) _____
 to (name of parent) _____
 D. ☐ from shared placement to primary placement with (name of parent) _____
 E. ☐ from the current placement schedule (if any) to a new schedule ***we have attached.***
 F. ☐ to require placement be ☐ supervised. ☐ unsupervised.
 G. ☐ Other: _____

☐ See attached

3. ☐ Additional Changes as follows:

☐ See attached

4. Basis

A. This request is based on the following substantial change in circumstances that have occurred since the entry of the prior court order in this case:

1. ☐ a child who was living with _____ is now living with _____.
2. ☐ a child is no longer eligible for child support because the child has reached age 18, or is over 18 but under 19, and is no longer pursuing a course of education leading to a high school diploma or its equivalent.
3. ☐ one of the parties has or will be moving to a different residence.
4. ☐ there was not a placement schedule and the parties could not agree.
5. ☐ employment or work shift of _____ has changed.
☐ both parties has changed.
6. ☐ income or wages of _____ has changed.
☐ both parties has changed.
7. ☐ the party to whom maintenance is owed has remarried.
8. ☐ Other: _____

B. 1. The facts explaining the substantial change in circumstances are:

☐ See attached

2. If you are agreeing to change child support, and are not using the child support guidelines, explain the reasons for not using them: _____

Check all that apply in 1-8. If other, enter the change in circumstance that has prompted you to bring this Motion.

In B.1. describe the facts that justify the change you want. Attach additional pages, if necessary.

In 2., explain.

THE COURT ADOPTS AS FINDINGS THE FACTS SET FORTH ABOVE.

☐ **THE COURT FURTHER FINDS:****For Court Use Only.**

Deviation from the child support percentage standards meets the requirements of §767.511(1n).

1. Amount support would be using percentage standard is as set forth in 1.A.3.
2. Amount support deviates from percentage standard is as set forth in 1.A.3.
3. Percentage standard is unfair ☐ for the reasons set forth in 4.B.2.
☐ Other: _____

4. The reasons for the amount and basis of modification are ☐ as set forth in 4.B.2.
☐ Other: _____

THE COURT ORDERS:

1. This stipulation is approved and the previous judgment or order is amended accordingly.
2. All provisions of the previous judgment or order not amended by this order remain in full effect.

State of Wisconsin, Child Support Agency

- ☐ Approved
☐ Not Approved
☐ Not Required

If either party is receiving public assistance or there is a case worker from the Child Support Agency assigned to your case, you must take this agreement to the Child Support Agency in your county for their approval.

If not, mark not required.

The former wife/mother must sign and print her name.

Enter the date on which she signed her name.

Note: This signature does not need to be notarized.

The former husband/father must sign and print his name.

Enter the date on which he signed his name.

Note: This signature does not need to be notarized.

Authorized Signature_____
Print or Type Name_____
Date▶ _____
Signature of Wife/Mother_____
Print or Type Name_____
Date▶ _____
Signature of Husband/Father_____
Print or Type Name_____
Date**BY THE COURT:**_____
Circuit Court Judge/Circuit Court Commissioner_____
Print or Type Name_____
Date**For Court Use Only.**